



RECEIPT

PATENT  
Docket No. 360842007600

**CERTIFICATE OF HAND DELIVERY**

I hereby certify that this correspondence is being hand filed with the United States Patent and Trademark Office in Washington, D.C. on July 17, 2001.

*N. DeRiggi*  
N. DeRiggi

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In the application of:

Kimikazu NAGASE et al.

Serial No.: 09/825,931

Filing Date: April 5, 2001

For: DIRECTLY IMAGEABLE  
PLANOGRAPHIC PRINTING PLATE AND  
PRODUCTION METHOD THEREOF

Examiner: unassigned

Group Art Unit: unassigned

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AUG 22 2001  
TC 1700

**REQUEST FOR A CORRECTED FILING RECEIPT**

Attn: Office of Initial Patent Examination's Customer Service Center  
Commissioner for Patents  
Washington, D.C. 20231

Sir:

Please furnish the undersigned with a corrected Filing Receipt for the above-identified application. The corrections needed are as follows:

Please change the first inventor's place of residence to **Shiga**.

A copy of the marked-up Filing Receipt is attached.

Respectfully submitted,

Dated: July 17, 2001

By:

*Barry E. Bretschneider*

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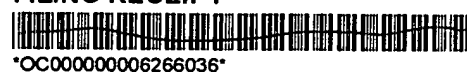
## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/825,931	04/05/2001	1752	1256	360842007600		17	6

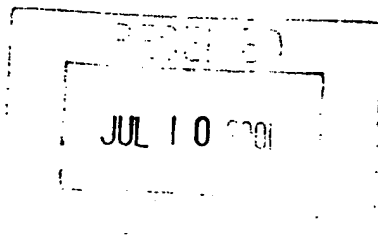
CONFIRMATION NO. 3818

## FILING RECEIPT



\*OC000000006266036\*

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Suite 5500  
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Washington, DC 20006-8798



Date Mailed: 07/06/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Shiga

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AUG 22 2001  
TC 1700

Domestic Priority data as claimed by applicant

## Foreign Applications

JAPAN 2000-104334 04/06/2000  
JAPAN 2000-128758 04/28/2000

If Required, Foreign Filing License Granted 07/06/2001

Projected Publication Date: 10/18/2001

Non-Publication Request: No

Early Publication Request: No

## Title

Directly imageable planographic printing plate and production method thereof

DOCKETED



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Bib Data Sheet

CONFIRMATION NO. 3818

<b>SERIAL NUMBER</b> 09/825,931	<b>FILING DATE</b> 04/05/2001 <b>RULE</b>	<b>CLASS</b> 430	<b>GROUP ART UNIT</b> 1752	<b>ATTORNEY DOCKET NO.</b> 360842007600
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Kazuki Goto, Shiga, JAPAN;  
Ken Kawamura, Shiga, JAPAN;  
Kunitaka Fujiyoshi, Shiga, JAPAN;

**\*\* CONTINUING DATA \*\*\*\*\*** *none*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *Apn*  
JAPAN 2000-104334 04/06/2000  
JAPAN 2000-128758 04/28/2000

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 07/06/2001**

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 0	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>				

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**TITLE**  
Directly imageable planographic printing plate and production method thereof

<b>FILING FEE RECEIVED</b> 1256	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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